Department of Health Services
Toxic Substances Confiol Division
Secremento, California

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) information in the shaded areas is not required by Federal Manifest 1. Generator's US EPA ID No. 2. Page 1 **UNIFORM HAZARDOUS** Document No WASTE MANIFEST CAX000224519 law. A.State: Manlisst Document-Number Generator's Name and Mailing Address 84881787 Integrated Networks 3183 Redhill, Costa Mesa, CA 92626 B'State Generator's ID Generator's Phone (714) 641-9250 CAX000224519 C.Blate Transporter's ID US EPA ID Number Transporter 1 Company Name Charlesonais Adique 6 /47612-47612 H Omega Chemical Corp. CAD04224500.1 EState Transporters D Transporter 2 Company Name US EPA ID Number F Transporter's Phone G.State Facility's ID US EPA ID Number 9. Designated Facility Name and Site Address CAU 0 42 24 5 0 0 1 H Facility's Phone Omega Chemical Corp. 12504 E. Whittier Flyd. 213/698-0991 CAD042245001 Whittier, CA 90602 12.Containers Total Unit 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Waste No. No. Туре ORM-A a Waste ORM-A N.O.S. NA 1693 400 G 2 1 1 (5120 Solution) 008 DM WWW. Waste ORM A N.O.S. ORM-A (Fluerosolv-TMS) 田 BHAZArdous WASTE (FLUORUSLY TMS DM d. > Additional Approximation (or Materials State Above K Handling Codes for Wastes Listed Above 8 CALLED COTTO IN LOTS ON THE TELLUCIONE PLUCCEMENTANIE ∞ ∞ 4 15. Special Handling Instructions and Additional Information Send blank, hazardous waste labels for customer's future use. -15 - 20-16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations. Date Month Day Year Printed/Typed Name Signature 1223 85 CALVIN L. BEEKER Date 17. Transporter 1 Acknowledgement of Receipt of Materials Month Day Signature, Printed/Typed Name ISAAC Woods Date 18. Transporter 2 Acknowledgement of Receipt of Materials Month Day Year Signature Printed/Typed Name 19. Discrepancy Indication Space 1) RECEIVED 292.5 GALS 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date Month Day Year Signature Printed/Typed Name

DHS 8022 A (11/84) (EPA 8700-22)

STEVEN SIMPSON

White ISDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS To: P.O. Box 3000, Sacramento CA 95812

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